



Attorney Docket No.:MSA-004.01

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Duff et al.	)		
Appl. No.: 09/247,874	)	Art Unit:	1643
Filed: February 10, 1999	)	Examiner:	Not Yet Assigned
For: Therapeutics and Diagnostics Based on a Novel II-1B Mutation	) )		

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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231, on May 21, 1999.

Carmen Parra

Application Processing Division's Customer Corrections Branch Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

# REQUEST FOR CORRECTION OF FILING RECEIPT AND REQUEST FOR CORRECTION OF CERTIFIED COPY

Enclosed is a copy of the Filing Receipt received from the United States Patent and Trademark Office for the above-referenced application. There is an error on the Filing Receipt. The title of the application should read **Therapeutics and Diagnostics Based on a Novel IL-1B Mutation**, as indicated on the first page of the application as filed (copy enclosed).

The correct information, adding IL, is shown in red ink on the filing receipt.

Applicants respectfully request issuance of a corrected filing receipt for this application.

Applicants further request that the correct title be corrected on the certified copy of this application.

If there are any questions concerning this request, the Examiner is invited to contact the

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undersigned at (617) 832-1272.

If there are any fees due in connection with the filing of this request, please charge the fees to our **Deposit Account No. 06-1448.** 

May 21, 1999

Patent Group Foley, Hoag & Eliot LLP One Post Office Square Boston, MA 02109-2170 Tel. (617) 832-1000 Respectfully submitted,

FOLEY, HOAG & ELIOT LLP

Beth E. Arnold Reg. No. 35,430



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### THERAPEUTICS AND DIAGNOSTICS BASED ON A NOVEL IL-1B MUTATION

#### 10 1. BACKGROUND OF THE INVENTION

Genetic testing (also referred to as "genetic screening" or "genotyping") involves the analysis of an individual's genomic DNA (or a nucleic acid corresponding thereto) to identify a particular disease causing or contributing mutation or polymorphism, directly or based on detection of a mutation or polymorphism (a marker) that is in linkage disequilibrium with the disease causing or contributing gene.

Early indication of a genetic predisposition to a particular disease provides an opportunity for medical intervention before the development of clinically characteristic symptoms. In addition, sophisticated genetic testing can in many instances differentiate individual patients with subtle or clinically indistinguishable differences, facilitating a more customized therapy. In addition, identification of a mutation can provide a target for identifying drug candidates.

Diseases and conditions, both monogenic and polygenic, for which diagnostic or prognostic genetic tests exist include: Cystic Fibrosis, Gaucher's Disease, Huntington's Disease, Duchenne Muscular Dystrophy, hemophilias, thalassemias, Alzheimer's Disease, breast, ovarian and prostatic cancers and periodontal disease. This list continues to grow.

The IL-1 gene cluster is located on the long arm of chromosome 2 (2q13) and contains at least the genes for IL-1 $\alpha$  (IL-1A), IL-1 $\beta$  (IL-1B), and the IL-1 receptor antagonist (IL-1RN) within a region of 430 Kb (Nicklin, et al., Genomics 19: 382-4 (1994)). The agonist molecules, IL-1 $\alpha$  and IL-1 $\beta$ , have potent pro-inflammatory activity and are involved with the initiation of many inflammatory cascades. Their actions, often via the induction of other cytokines such as IL-6 and IL-8, lead to activation and recruitment of leukocytes into damaged tissue, local production of vasoactive agents, fever response in the brain and the hepatic acute phase response. The IL-1 receptor antagonist binds to the IL-1 receptor, but does not activate a signal. IL-1 $\alpha$  and IL-1 $\beta$  proteins bind to type I and type II IL-1 receptors, but only the type I receptor transduces a signal to the interior of the cell. In contrast, the type II receptor may be surface bound or may be shed to become a soluble receptor. The bound type I receptor binds the agonist molecule but does not transduce a signal to activate the cell. The soluble receptors bind agonists and act as a decoy receptor. The receptor antagonist and the type II receptor, therefore, are both anti-inflammatory in their actions.

)-103X v. 8-95)

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APPLICATION NUMBER	RI FILING DATE		\$890.00 MSA-004.01	8	42	6
09/247,874	02/10/99	1643	\$890.00 MSR 001102			

PATENT GROUP FOLEY HOAG & ELIOT ONE POST OFFICE SQUARE BOSTON MA 02109-2170

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

GORDON DUFF, SOUTH YORKSHIRE, ENGLAND; FRANCESCO SAVERIO DI GIOVINE, SHEFFIELD, ENGLAND.

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TITLE
THERAPEUTICS AND DIAGNOSTICS BASED ON A NOVEL-1B MUTATION
PRELIMINARY CLASS: 435

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DATA ENTRY BY: BELL, DOROTHY

TEAM: 04 DATE: 04/26/99

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